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TROY M. SCHN HOGAN & HART	SON, L.L.P. ND AVENUE, SUITE CA 90071	1900		I hereby certify that t States Postal Service	ertificate of Mailing or Transhits Fee(s) Transmittal is bein with sufficient postage for full Stop ISSUE FEE address PTO (571) 273-2885, on the Company of	g deposited with the United
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APPLICATION NO.	FILING DATE	F	FIRST NAMED	INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/749,570 TITLE OF INVENTION: V	12/31/2003 'ARIABLE CLOCK RATE	ANALOG-TO-DIG	Mikko V		7 109822 98 88537, 0068	8972
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	NO \$1400		\$300	\$1700	05/15/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS]	
WAMSLEY, PATRICK G		2819 3		341-155000	_	
CFR 1:363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless	tion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO Be an assignee is identified be 137 CFR 3.11. Completion	Correspondence ation form e of a Customer E PRINTED ON Telow, no assignee dof this form is NOT	(1) the name or agents O (2) the name registered a 2 registered in the control of	ar on the patent. If an assig or filing an assignment.	a member a 2 anes of up to f no name is 3 nee is identified below, the content of the state of	U & HARTSON, L
(B) RESIDENCE: (CITY and STATE OR COUNTRY) CONEXANT SYSTEMS, INC. New port Beach, CAUF Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Acorporation or other						
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Typed or printed name _	O TROY	SCHMEL	7×2	Registration	No. 36, 66	
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